

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **G52025 (5)**  
1. Corporation Name  
**GFR CONSTRUCTION, INC.**



Principal Place of Business Mailing Address  
**2717 W CYPRESS CREEK RD FT. LAUDERDALE FL 33309**

2. Principal Place of Business  
21 **1475 W. Cypress Creek Rd**  
Suite, Apt. #, etc. **#204**  
City & State **Ft. Lauderdale, FL**  
Zip **33309** Country **Broward**  
2a. Mailing Address  
26 **1475 W. Cypress Creek Rd.**  
Suite, Apt. #, etc. **#204**  
City & State **Ft. Lauderdale, FL**  
Zip **33309** Country **Broward**

3. Date Incorporated or Created **07/29/1983** 3a. Date of Last Report **04/10/1995**  
4. FEI Number **59-2322905** Applied For Not Applicable  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No  
9. Name and Address of Current Registered Agent  
10. Name and Address of New Registered Agent

**GOLDING, STEPHEN M.**  
**2717 W CYPRESS CREEK RD**  
**FT. LAUDERDALE FL 33309**

81 Name **SAME**  
82 Street Address (P.O. Box Number is Not Acceptable) **1475 W CYPRESS CREEK RD.**  
83 **#204**  
84 City **FT. LAUDERDALE,** FL 85 Zip Code **33309**

11. Pursuant to the provisions of Sections 607.0579 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Board of Directors. Thereby, I accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Block 12) or Director (Block 13)

Signature of Registered Agent (Block 12) or Director (Block 13)

DATE

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	<b>P</b>	
NAME	<b>RICHARD, GAETAN F.</b>	
STREET ADDRESS	<b>738 MIDDLE RIVER DR.</b>	
CITY- ST- ZIP	<b>FT LAUDERDALE, FL 00000</b>	
TITLE	<b>VT</b>	<input type="checkbox"/> DELETE
NAME	<b>RICHARD, ELAINE E.</b>	
STREET ADDRESS	<b>738 MIDDLE RIVER DR.</b>	
CITY- ST- ZIP	<b>FT. LAUDERDALE FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1. TITLE			
2. NAME			
3. STREET ADDRESS			
4. CITY- ST- ZIP			
5. TITLE			
6. NAME			
7. STREET ADDRESS			
8. CITY- ST- ZIP			
9. TITLE			
10. NAME			
11. STREET ADDRESS			
12. CITY- ST- ZIP			
13. TITLE			
14. NAME			
15. STREET ADDRESS			
16. CITY- ST- ZIP			
17. TITLE			
18. NAME			
19. STREET ADDRESS			
20. CITY- ST- ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplement or annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Elaine E. Richard*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Elaine E. Richard**

4-16-96 954-524-7900  
DATE TELEPHONE

CR2E034 (12/95)